

## Application Data Sheet

### Application Information

Application Type::	Regular
Subject Matter::	
Suggested classification::	Utility
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of copies of CDs::	
Sequence submission?::	
Computer Readable Form (CRF)?::	No
Number of copies of CRF::	
Title ::	INFORMATION PROCESSING SYSTEM AND INFORMATION PROCESSING METHOD
Attorney Docket Number::	YOSHID0021
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	1
Total Drawing Sheets::	60
Small Entity?::	Yes
Latin Name::	
Variety denomination name::	
Petition included?::	No
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No

## Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Japan
Status::	Full Capacity
Given Name::	Shinji
Middle Name::	
Family Name::	FURUSHO
Name Suffix::	
City of Residence::	Yokohama-shi
State or Province of Residence::	Kanagawa
Country of Residence::	Japan
Street of mailing address::	Court house Kikuna 804, 1101-7 Matsumi-cho 4-chome, Kanagawa-ku
City of mailing address::	Yokohama-shi
State or Province of mailing address::	Kanagawa
Country of mailing address::	Japan
Postal or Zip Code of mailing address::	221-0005

## Correspondence Information

Correspondence Customer Number :: 24203

Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::

Phone Number:: (703) 979-5700  
Fax Number:: (703) 979-7429  
E-Mail address:: [GANDS@szipl.com](mailto:GANDS@szipl.com)

## Representative Information

Representative Customer Number::	24203	
----------------------------------	-------	--

## Domestic Priority Information

Application ::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/JP2004/005323	04/14/04

## Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::
Japan	2003-111978	04/16/03	Yes

## Assignee Information

Assignee name::  
Street of mailing address::  
City of mailing address::  
State or province of mailing address::  
Country of mailing address::  
Postal or Zip Code of mailing address::